

**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES  
DIVISION OF ENVIRONMENTAL HEALTH  
EATING & DRINKING ESTABLISHMENT / FOOD ESTABLISHMENT  
INSPECTION REPORT**

<b>REASON</b>	<b>GRADE</b>	<b>Inspection Date:</b>	<b>ESTABLISHMENT NAME:</b>	
Regular <input checked="" type="checkbox"/>	3	7/31/2018	IPEE SHELL FOODS (MIGUEL MORA)	
Follow-Up <input type="checkbox"/>		Time In	Time Out	<b>OWNER/OPERATOR:</b>
Complaint <input checked="" type="checkbox"/>		2:15pm	5:10pm	IPEE HOLDINGS, LLC
Investigation <input type="checkbox"/>	<b>RATING</b>	<b>Sanitary Permit No.:</b>	<b>LOCATION:</b>	<b>Establishment Type:</b>
Other: <input type="checkbox"/>	A	20000-180002280	Cot 5049-2-125 #1555 Route 2, North Haven Conn 06460	Manufacturer
		<b>PERMIT STATUS:</b> <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Temporary <input type="checkbox"/> Expired		

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection, or sooner, as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal, a written request for hearing must be submitted before the indicated correction date.

ITEM*	REMARKS	DEMERIT	CORRECT BY
	A REGULAR INSPECTION WAS CONDUCTED ON THIS DAY BASED ON COMPLAINT #18-029A REGARDING LONGANIZA THAT IS SLIMEY AND FOOD HELD IN THE WARMER BUT IT IS NOT WARM. <del>NO</del> NO EVIDENCE TO SUPPORT THE COMPLAINT WAS OBSERVED AT THE TIME OF INSPECTION. PREVIOUS INSPECTION WAS CONDUCTED ON 9/14/2017 O/A.		
	THE FOLLOWING VIOLATIONS WERE OBSERVED:		
#17	CHEMICAL TEST KITS NOT PROVIDED/USED. CHEMICAL TEST KITS SHALL BE PROVIDED AND USED TO ENSURE PROPER SANITIZING IS CONDUCTED.	1	
#24	CLEANED KNIVES AND SPOONS STORED AGAINST A RUSTED EQUIPMENT HOLDING DEVICE. ALL UTENSILS/EQUIPMENT SHALL BE STORED PROPERLY TO PREVENT ANY CONTAMINATION PRIOR TO USE.	2	
	PHOTOS WERE TAKEN DISCUSSED INSPECTION REPORT WITH PERSON IN CHARGE REMOVED "A" PLACARD NO. 03028 ISSUED "A" PLACARD NO. 03063		

I have read and understand the above violation(s) and I am aware of the corrective measures that I must take.

\*Note: When any of the following items are cited above, they shall be corrected within 10 days of this inspection:

(1), (3), (11), (12), (27), (28), (30), (41) & (45).

Received By (Name & Title):

LUIGUE PABLOA STATION MANAGER

DEH Inspector (Name & Title):

Debra Mitchell EPH

Chie Takase